

information about the psychopharmacology of LSD did not initially deter abuse of the substance and it was not until humans began entering hospitals with very serious reactions that the public and some of the high risk groups began to take the problem seriously. Use of alcohol and cigarette smoking are comparable problems showing the lack of an effective educational program.

The previous studies that have been done on marihuana do not, I feel, give us a scientific basis for saying what the proper type and level of sanctions on marihuana should be. The claims made by enforcement persons were made in the case of marihuana on the basis of cases they had seen in the enforcement setting but the possibility that other causes besides the drug lead to the dire effects was not adequately considered. The subjective impressions of persons close to the marihuana scene may or may not have been correct but as a basis of proceeding now, subjective impression or "enforcement experience" is inadequate.

The nature of usage of marihuana has expanded significantly from those who used it as an early substitute for heroin and other narcotics to include those who now use the drug to seek enjoyment and respite from the stresses and strains of living. Unless more than "impressionistic" data gathering facilities exist or are created, one cannot detect such shifts in the type of user as apparently has happened in the recent past, except on a qualitative basis. Since the whole issue is charged by the social context and the proximity to dangerous drugs, attitudes have become polarized, thus distorting a neutral and objective interpretation of whatever skimpy data we do have available.

What we need now is an intensive effort to identify our areas of scientific knowledge and the gaps that exist in it with immediate research to fill these in and, secondly, at the same time to begin to study ways of utilizing this information in an effective manner, rather than assuming our current education techniques will do the job.

At the same time that scientific and educational work is done, we must begin to develop a conceptual framework in which to integrate the pharmacology and the psychology of use of the drug. For example, some type of integrated view that takes a balancing or compromising position among the extremes would lead us to some estimate of the type and level of social controls that are needed on the drug. We need to look at the potential for abuse and the hazard to health possibly in terms of a continuum in which the maximum danger point is the worst that the drug could do under extreme conditions in a small group of unstable people. At the other hand, looking at the minimum potential for abuse, one needs to ask the question of what the least effects of the drug are and what the drug may do under the best usage conditions in a group of well adjusted stable persons using low dosage levels. Information on prevalence of usage by various types of persons would then be one factor to be considered in making an initial judgment about controls. Other factors to be considered along with this one are the "association complex" (what other drugs typically travel with marihuana) and what is the capacity of the drug to change the perceptions the user has of other drugs. Some type of conceptual framework such as this would be helpful in guiding the identification of the most important scientific and educational research efforts on which a recommendation and decision about social controls might be made.

JEAN PAUL SMITH, Ph. D.

JULY 21, 1967.

Dr. MILTON SILVERMAN,
Special Assistant to the Assistant Secretary for Health and Scientific Affairs.
JAMES L. GODDARD, M.D.,
Commissioner of Food and Drugs.

HEW POSITION ON MARIHUANA

There are at least four alternatives to the marihuana problem from the Federal standpoint. This paper will touch on the advantages and disadvantages of four major categories and will recommend the position HEW should take. The categories are (1) leave the current status of marihuana law as it is without legal or administrative changes, (2) completely legalize marihuana use, sale, possession and distribution, (3) leave marihuana control with the Federal Bureau of Narcotics (FBN) but with reductions in the criminal penalties for sale and